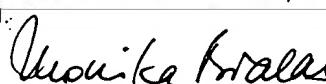


<b>TRANSMITTAL LETTER</b> <b>(General - Patent Pending)</b>		Docket No. 02-359-B (old #Q962-DB)
In Re Application Of: <b>Kapp, Martin A.</b>		<b>COPY OF PAPERS ORIGINALLY FILED</b>
Serial No. <b>09/934,629</b>	Filing Date <b>08/21/2001</b>	Examiner <b>Unknown at this time</b>
Title: <b>INCOME TAX PREPARATION SYSTEM FOR TRAVELING TAXPAYERS</b>		
<b><u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u></b>		
Transmitted herewith is: <b>Revocation of Power of Attorney (Attorney Docket No. Q962-DB)</b> <b>Power of Attorney (new Attorney Docket No. 02-359-B)</b>		<b>RECEIVED</b> <b>JUN 27 2002</b> <b>Technology Center 2100</b>
In the above identified application. <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> No additional fee is required.</li> <li><input type="checkbox"/> A check in the amount of _____ is attached.</li> <li><input type="checkbox"/> The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. _____ as described below. A duplicate copy of this sheet is enclosed.           <ul style="list-style-type: none"> <li><input type="checkbox"/> Charge the amount of _____</li> <li><input type="checkbox"/> Credit any overpayment.</li> <li><input type="checkbox"/> Charge any additional fee required.</li> </ul> </li> </ul>		
<b>RECEIVED</b> <b>JUN 27 2002</b> <b>GROUP 3600</b>		
 Signature Dated: June 14, 2002		
<b>David A. Belasco, Reg. No. 41,609</b> <b>BELASCO JACOBS &amp; TOWNSLEY, LLP</b> <b>100 Corporate Pointe, Suite 330</b> <b>Culver City, California 90230</b> <b>Telephone: (310) 743-1188</b>		<div style="border: 1px solid black; padding: 5px;">         I certify that this document and fee is being deposited on June 14, 2002 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.            Signature of Person Mailing Correspondence  <b>Monika Bialas</b>          Typed or Printed Name of Person Mailing Correspondence       </div>
CC:		

JUN 21 2002

Please type a plus sign (+) inside this box

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT

Application Number	09/934,629
Filing Date	08/21/2001
First Named Inventor	Kapp, Martin A.
Title	Income Tax Preparation...
Group Art Unit	2163
Examiner Name	Not yet assigned
Attorney Docket Number	02-359-B

I hereby appoint:

 Practitioners at Customer Number

31718



OR

 Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.

OR

 Practitioners at Customer Number

Place Customer  
Number Bar Code  
Label here

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

RECEIVED

JUN 27 2002

GROUP 3600

SIGNATURE of Applicant or Assignee of Record

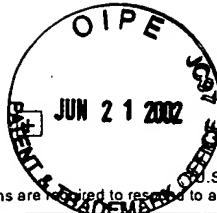
Name	Martin A. Kapp
Signature	
Date	6/13/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

 Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

OPY OF PAPERS  
ORIGINALLY FILED



Please type a plus sign (+) inside this box →

PTO/SB/82 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/934,629
Filing Date	08/21/2001
First Named Inventor	Kapp, Martin A.
Group Art Unit	2163
Examiner Name	not yet assigned
Attorney Docket Number	Q962-DB (new # 02-359-B)

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

A Power of Attorney or Authorization of Agent is submitted herewith.

OR

Please change the correspondence address for the above-identified application to:

Customer Number



Place Customer  
Number Bar Code  
Label here

OR

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City				
Country	State		ZIP	
Telephone	Fax			

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

RECEIVED

JUN 27 2002

GROUP 3600

### SIGNATURE of Applicant or Assignee of Record

Name	Martin A. Kapp
Signature	
Date	6/13/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

\*Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.